CHARTER FIBERLINK NH-CCO, LLC

Betty SandersSr. Director-Regulatory Affairs

Direct: 314-288-3259 Email: betty.sanders@chartercom.com

DT 14-160

July 16, 2014

MHPUC 17JUL'14m11:33

VIA FedEx Overnight

Ms. Debra Howland New Hampshire Public Utilities Commission 21 S. Fruit St. Suite 10 Concord, NH 03301-2429

RE: Charter Fiberlink NH-CCO, LLC Intrastate Access Services Rate Schedule Filing

Dear Ms. Howland:

Please find enclosed a revised filing of Charter Fiberlink NH–CCO, LLC ("Charter"), Intrastate Access Services Rate Schedule pursuant to Charter's Certificate of Authorization to provide service under Authorization No. 09-016-04.

Included with this filing please find:

letty Sanger

3rd Revised Page 2 1st Revised Page 34.1 2nd Revised Page 35

2nd Revised Page 36 2nd Revised Page 39

This filing carries an effective date of July 31, 2014. In this filing, Charter is updating rates pursuant to FCC 2011 USF-ICC order and June 3, 2014 NH PUC memo re: Change to CLEC Intrastate Access Filing due date and DT14-160.

Questions regarding this filing may be directed to me at 314 288-3259 or to Larry Bowman at 314 543-5855.

Sincerely,

Betty Sanders



NEW HAMPSHIRE PUBLIC UTILITIES COMMISSION 21 S. FRUIT ST., STE 10 CONCORD, NH 03301-2429 603-271-2431 www.puc.nh.gov

NHPUC Form CLEC-25 Rate Schedule Cover Sheet Puc 449.10 Rev. 03/30/06

CLEC RATE SCHEDULE COVER SHEET

1. General Information					
Federal Identification Number	20-0709514				
CLEC Authorization Number	10-011-15	OR	Date of Ap	plication	10/4/05
Legal Name	Charter Fiberlink NH-CCC), LLC			
Trade Name (d/b/a) in New Hampshire					
Regulatory Contact	Betty Sanders/Larry Bown	nan			
Complete Mailing Address	12405 Powerscourt Drive				
	St Louis, MO 63131		***************************************		
Phone Number	314-288-3259			W-14-1-4	
Fax Number	314-543-3555			····	
E-mail Address	betty.sanders@chartercom.	com or lar	ry.bowman(@charterc	om.com
2. Attachments					
Attach rate sheets, and include					
a. The name of the service as appears on customer bills;b. The name of the service as appears on company provisioning documents;					
c. A brief description of service;					
d. The price at which the service is offered; ande. The date on which the price is effective.					
Any rate schedule of more than t	en pages shall include a tabl	e of conte	nts and num	bered pag	es.
3. Signature				<i>J-8</i>	
I certify that the information on this form is true and correct to the best of my knowledge and belief subject to the penalty for making unsworn false statements under RSA 641:3.					
Authorized Representative Signature	eth Danke	h	Title	Sr. Direc	ctor Regulatory Affairs
Printed Name _Bet	ty Sanders		Date	7	6/14

If you have any questions, please call the New Hampshire Public Utilities Commission at 603-271-2431. Please mail any documents to the above address.